

Appeal Type: Experimental	Appeal Category: IDET (Intradiscal Electrothermal Therapy)
Case Number: 0100050	Appeal Decision: Overturned
Case Summary: Patient with severe back pain requesting coverage for IDET to alleviate pain.	Reason for Decision: External review agency determined that this procedure is appropriate for this patient and is not an investigational procedure.

Appeal Type: Experimental	Appeal Category: XTRAC Laser Surgery
Case Number: 0100051	Appeal Decision: Upheld
Case Summary: Patient requesting cover for XTRAC Laser Surgery for treatment of psoriasis.	Reason for Decision: External review agency determined that despite the surgery's FDA approval, it is not yet considered an accepted practice in the medical community. There are other treatments that this patient has not yet tried. Therefore, it is an experimental surgery and not a covered benefit.

Appeal Type: Experimental	Appeal Category: Optometric Vision Therapy
Case Number: 0100070	Appeal Decision: Upheld
Case Summary: Patient requesting vision therapy.	Reason for Decision: External review agency determined that there is little or no scientific evidence regarding its clinical efficacy. Therefore, it is experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: Photodynamic Therapy Treatment
Case Number: 0100084	Appeal Decision: Partially Overturned
Case Summary: Patient requesting coverage for photodynamic therapy treatment for laser removal of skin cancer with an out-of-plan provider.	Reason for Decision: External review agency determined that this service is medically necessary, however, the service can be provided with an in network provider rather than using the requested out-of-plan provider. * After the review decision, the health plan provided additional information that showed there were no in-plan providers for this type of treatment. The health plan therefore agreed to cover this patient's services with an out-of-plan provider.

Appeal Type: Experimental	Appeal Category: Liver Transplant (Patient with HIV)
Case Number: 0100096	Appeal Decision: Upheld
Case Summary: Patient has liver damage due to Hepatitis C, but also has HIV. Requesting coverage for liver transplant.	Reason for Decision: External review agency determined that the presence of HIV in this patient makes the liver transplant dangerous for the patient during and after the procedure and is considered experimental due to the lack of studies regarding liver transplants for HIV patients.

Appeal Type: Experimental	Appeal Category: Proton Beam Therapy
Case Number: 0100098	Appeal Decision: Upheld
Case Summary: Patient requesting proton beam therapy for treatment of Prostate Cancer.	Reason for Decision: External review agency determined that this treatment is not generally accepted in the medical community as common practice and is not the only form of treatment for this particular patient. Therefore it is experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: IDET (Intradiscal Electrothermal Therapy)
Case Number: 0100102	Appeal Decision: Upheld
Case Summary: Patient requesting IDET treatment to relieve pain and reestablish mobility in the lower back.	Reason for Decision: External review agency determined that IDET is not in widespread use and there is no scientific evidence to justify its use for back pain. Therefore it is considered experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: Autologous Chondrocyte Implantation (ACI) and Meniscal Allograft
Case Number: 0100104	Appeal Decision: Overturned
Case Summary: Patient is requesting ACI and Meniscal Allograft due to knee injury.	Reason for Decision: External review agency determined that although this procedure is not common; this is because the patient's condition is rare. When this procedure is used it is very successful and an accepted procedure in the medical community. Therefore it is a covered benefit for this patient.

Appeal Type: Experimental	Appeal Category: Visudyne Therapy
Case Number: 0100116	Appeal Decision: Overturned
Case Summary: Patient requesting visudyne therapy for treatment of myopic degeneration.	Reason for Decision: External review agency determined this procedure is not experimental and is accepted in the medical community. Therefore it is a covered benefit for this patient.

Appeal Type: Experimental	Appeal Category: IDET (Intradiscal Electrothermal Therapy)
Case Number: 0100136	Appeal Decision: Upheld
Case Summary: Patient with back complications requesting IDET treatment.	Reason for Decision: External review agency determined IDET has not been proven to be more beneficial than traditional treatments, no conclusive studies have been done showing its effectiveness, and patient has scoliosis for which there have been no studies for regarding IDET. Therefore it is experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: Ossatron Treatment
Case Number: 0100139	Appeal Decision: Upheld
Case Summary: Patient requesting Ossatron Treatment for chronic plantar fasciitis, calcaneal bursitis, and heel spurs (bilateral).	Reason for Decision: External review agency determined that the studies done on this treatment were not conclusive enough because there were flaws in the studies themselves. Therefore the treatment is considered experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: IDET (Intradiscal Electrothermal Therapy)
Case Number: 0100141	Appeal Decision: Upheld
Case Summary: Patient requesting IDET treatment for back pain.	Reason for Decision: External review agency determined that IDET is not in widespread use and is not based on scientific evidence. Therefore the treatment is experimental and not a covered benefit.

Appeal Type: Experimental	Appeal Category: Stretta Procedure
Case Number: 0100161	Appeal Decision: Upheld
Case Summary: Patient requesting Stretta Procedure to treat gastroesophageal reflux disease.	Reason for Decision: External review agency determined that more studies are needed comparing outcomes of this procedure to other accepted treatments for this condition. Since there are no studies to show this procedure is necessarily better than another, it is experimental under the health plan's contract and not a covered benefit.